UNITED NATIONS

ECONOMIC AND SOCIAL COUNCIL

Distr.
GENERAL

E/CN.7/1993/4
11 February 1993

ORIGINAL: ENGLISH

COMMISSION ON NARCOTIC DRUGS
Thirty-sixth session
Vienna, 29 March-7 April 1993
Item 3 of the provisional agenda*

GENERAL DEBATE

EXAMINATION OF THE WORLD SITUATION WITH RESPECT TO DRUG ABUSE, INCLUDING ILLICIT DEMAND, ILLICIT TRAFFICKING AND ILLICIT SUPPLY

Drug abuse: extent, patterns and trends

Report of the Secretariat

*E/CN.7/1993/1.

V.93-81567 8937T

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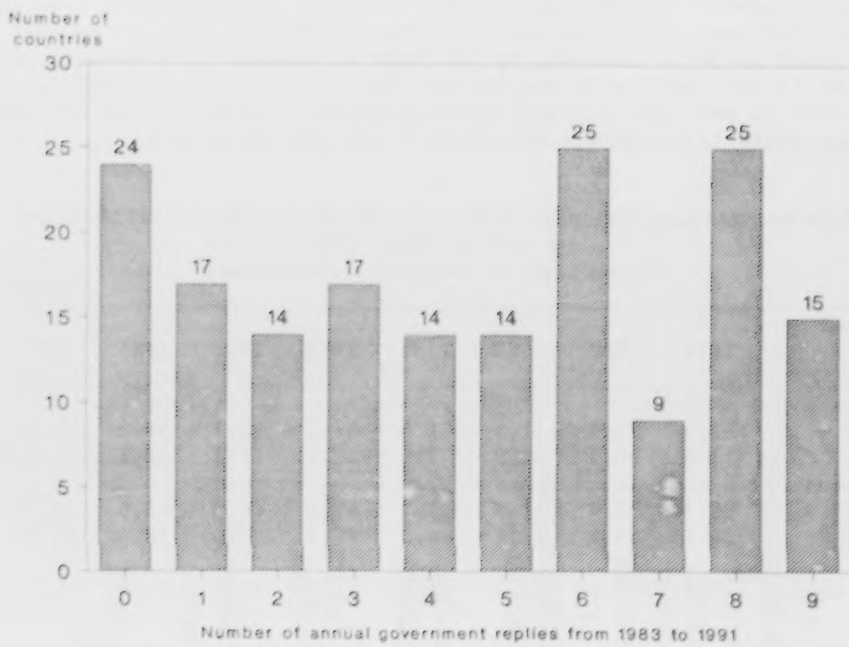
INTRODUCTION

1. The present document is based on data contained in government reports received by 15 January 1993 from 40 countries and territories that are parties to international drug control treaties. The government reports were submitted to the Secretary-General in response to the 1991 annual reports questionnaire. This report focuses on replies to part B of the questionnaire. Of the information received from Governments, only selected data were used in preparing this report due to time constraints, as well as high sampling variability that limited the validity of the data. Some additional information has been reported in the country profiles available from the United Nations International Drug Control Programme.

I. PATTERNS AND TRENDS IN REPORTING ON ISSUES RELATED TO DRUG ABUSE

2. Any analysis of the worldwide extent, patterns and trends of drug abuse is limited not only by the number of replies from Governments, but also by the quality of information provided. Only 13 Governments have replied to part B of the annual reports questionnaire every year since 1983, and 26 Governments have replied in eight of the last nine years. Twenty-five parties to the Single Convention on Narcotic Drugs of 1961 1/ have not replied at all (see figure I and annex I for more details).

Figure I. Number of replies to part B of the annual reports questionnaire, 1983-1991



3. As noted above, only 40 countries had replied to the 1991 annual reports questionnaire by 15 January 1993. The response rate is normally higher, ranging from 81 in 1990 to 115 in 1983. Despite the recent declines, higher response rates could clearly be achieved. In that connection, the failure by many countries in recent years to submit timely replies pinpoints the need for a review of survey and reporting procedures (see table 1 and annex I for more details).

Table 1. Country response to part B of the annual reports questionnaire, 1983-1991

Number of reporting countries	1991	1990	1989	1988	1987	1986	1985	1984	1983
Total per year	40 a/	81	91	84	103	102	99	112	115

a/ Latvia, Namibia, Republic of Moldova and Russian Federation reported for the first time in 1991. Only countries that reported by 15 January 1993 are included.

4. The quality of the information provided by Governments did not meet data collection objectives. First of all, the quality of the data is influenced by the high response variability, which fluctuates significantly from region to region. European countries reported most frequently with a response rate of 45 per cent in 1991, followed by the Near and Middle East with 18 per cent, Africa with 13 per cent, Asia and the Pacific with 20 per cent and the Americas with 12 per cent. These regional response rates follow the pattern of previous years (see table 2 and annex I for more details).

Table 2. Response to part B of the annual reports questionnaire, by region, 1983-1991
(Percentage of reporting countries)

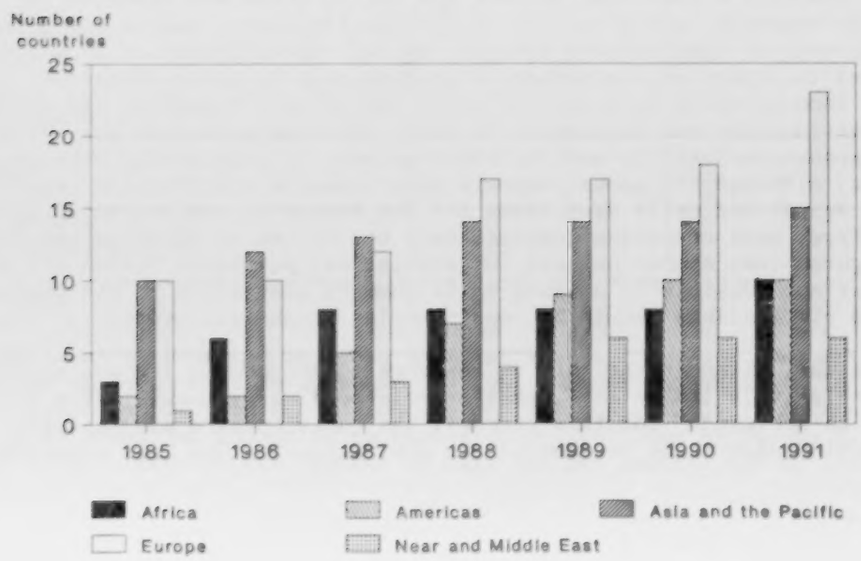
Region	1991	1990	1989	1988	1987	1986	1985	1984	1983
Africa	13.5	31.4	31.4	31.4	47.1	45.1	39.2	49.0	41.2
Americas	11.9	40.5	42.9	47.6	57.1	57.1	57.1	59.5	73.8
Asia and the Pacific	20.5	35.9	41.0	33.3	43.6	46.2	43.6	48.7	48.7
Europe	44.7	69.4	83.8	73.0	78.4	70.3	78.4	81.1	83.8
Near and Middle East	17.6	41.2	52.9	35.3	41.2	52.9	41.2	64.7	64.7
Total number of reporting countries	40	81	91	84	103	102	99	112	115

5. Response variability is further affected by inconsistent reporting within each region. For example, two thirds of the African and American countries responded to the questionnaire five times or less. In addition, partial completion of the questionnaire was very common, thus significantly reducing the response rate for specific items. Secondly, government access to data varies depending on the state of research in each country. In 1991, national registers were available in 21 of the 40 responding countries, survey data in 18, qualitative studies in 10, attitude studies in 14 and studies of the cost and consequences of drug abuse in 1 (see table 3). Since 1985, there has been a steady increase in the number of countries with registries of known drug abusers, as shown in figure II.

Table 3. Survey of data sources, by region, 1991

Region	Number of reporting countries	Number of Governments with access to different data sources: Registry	Surveys	Qualitative studies	Attitude studies	Studies of costs and consequences
Africa	7	2	2	2	2	--
Americas	5	2	3	2	4	--
Asia and the Pacific	8	6	4	1	1	1
Europe	17	11	8	5	6	--
Near and Middle East	3	--	1	--	1	--
TOTAL	40	21	18	10	14	1

Figure II. Countries with registries of known drug abusers



6. In response to the annual reports questionnaire, 21 of the 40 Governments have expressed a clear desire to set up monitoring and information systems. However, in order to do so, 10 Governments have indicated that they need financial help; 11 require professional support in training; 9 need help with equipment; and 15 require assistance in legal, technical and personnel matters and with expertise (see table 4).

Table 4. Survey of requests for assistance, by region, 1991

Region	Number of reporting countries		Requests by reporting coutries for specific types of assistance			
	Total	Those needing assistance	Training	Material	Financial	Legal, technical, personnel and expertise
Africa	7	5	5	4	3	1
Americas	5	4	2	2	2	--
Asia and the Pacific	8	5	3	1	3	6
Europe	17	5 a/	1	2	--	6
Near and Middle East	3	2	--	--	2	2
TOTAL	40	21	11	9	10	15

a/ All in Eastern Europe or founded from constituents of the former Union of Soviet Socialist Republics.

7. Annual counts for cannabis, cocaine and heroin abuse are reported in annex I. Governments used a variety of sources (including health and police records, surveys or combinations thereof, as well as estimates of an unspecified nature) to report on the number of drug abusers in their countries. Because of inconsistency in reporting since the current format of the annual reports questionnaire was introduced in 1985, the data presented are subject to high response variability and the findings must be interpreted with caution. Furthermore, although the annual reports questionnaire specifically requests figures on annual and daily drug abuse and the number of registered abusers for each drug type, many countries complete only one or two of these categories or provide figures that cannot be used for statistical purposes. Given all of the above, it is not possible to advance valid summary statistics in the present report, and all findings should be considered as rough indicators.

8. To conclude, although the rate of response to the annual reports questionnaire was relatively low in 1991, past experience clearly shows that a better rate could be achieved. For this purpose, the questionnaire and reporting procedures will need to be re-examined in coming years. The main concerns,

however, will remain the consistency of reporting and its quality. Much work needs to be done to promote timely and consistent reporting from year to year and to improve the quality of the questionnaire and the responses to it.

9. A systematic review of the state of research and related data collection in all countries that are parties to the international drug control treaties is urgently needed. Such a review is essential to establish basic guidelines for international reporting and to ensure efficient planning of incremental and realistic objectives. Special concerns with new and locally known illicit drugs that do not fall under international control should be taken into account, as well as special constraints caused by limited resources and differing priorities relating to monitoring of the drug problem. Overall, countries have shown a readiness to set up drug monitoring systems, but many have indicated that they need assistance to do so.

II. OVERVIEW OF WORLD PATTERNS AND TRENDS IN DRUG ABUSE BY REGION

10. Governments were asked to assess trends in the consumption of selected illicit drugs in their countries, to identify drugs causing particular concern, and to indicate whether consumption was on the increase, remained stable, or was decreasing. The collected data, presented in table 5, are subject to significantly high sampling variability and should be interpreted with caution. Only rough indicators of recent changes in worldwide consumption of selected illicit drugs are intended. Subsequent revisions of the same data, once responses from other countries are received, may lead to significant changes in the current findings.

Table 5. Changing global consumption of selected illicit drugs, 1991

Type of drug	Assessment of consumption trends based on number of government replies		
	Increasing	Stable	Decreasing
Amphetamine	3	1	3
Benzodiazepines	1	2	2
Cannabis	2	6	9
Cocaine	1	10	3
Hallucinogens	1	3	1
Heroin	7	4	1
Inhalants	2	2	3
Opium	2	2	2
Other opiates	2	2	-
Synthetic analgesics	2	1	1

11. The results presented in table 5 indicate that increased consumption of heroin was of concern to seven countries, while abuse remained stable in four and decreased in one. Increased concern was noted particularly in Africa, where three countries commented on heroin abuse, followed by Europe with two, and one country each in the regions of Asia and the Pacific and of the Near

and Middle East. Concern about amphetamine consumption increased in three countries, while abuse is estimated to be stable in one and to have decreased in three. Of note is a decrease in concern over the abuse of cannabis by nine reporting countries, while six considered consumption stable and two indicated an increase.

12. Annual counts of abusers are good indicators of the scope of drug abuse. but not necessarily of drug dependence requiring treatment and rehabilitation. They permit the identification of countries that may require special attention in the area of prevention programmes. This applies to all annual counts of abusers in the present report (see annex I).

13. Daily counts of registered abusers are good indicators of drug dependence. They highlight the countries that may require special attention in the area of treatment and rehabilitation programmes. This applies to all daily counts of abusers in the present report (see annex II).

14. Counts of registered abusers are derived from a variety of health and police records. The implications of the counts for programming and policy-making may vary because definitions vary from one source to another. These numbers may be used, however, as indicators of actual contacts with drug abusers who may have required treatment or may have been arrested.

15. Why are counts used and not rates? In most comparative data analysis, standard measures such as rates would have been used to compare drug abuse cases in different countries. In the present report, counts of drug abuse are reported rather than rates because varying data collection practices from country to country make it difficult to obtain really comparable data. The counts should not however be dismissed as unreliable statistical observations, because they do mean something for those who collect them, and they are useful for determining levels of concern and the efforts required to deal with drug abusers, including the methods to be used, in particular, prevention or treatment. As noted above, daily counts indicate dependency that is likely to require treatment, while annual counts may include dependent abusers as well as infrequent abusers for whom a prevention programme may be an adequate form of intervention. Registry counts are a measure of actual contacts with drug abusers who may have required treatment or been arrested. The nature of the contact changes from country to country depending on the choice of intervention needed. In some countries police contact is enough to qualify for registration; in other countries a court order may be required. Furthermore, in some cases neither police nor judicial interventions are criteria for registration; they indicate, rather, the need for treatment, usually medical treatment.

A. Africa

1. Patterns of reporting

16. About one third of African countries have reported six or more times during the nine years of the drug survey. Mauritius reported each year while Côte d'Ivoire did so eight out of nine years. Among the two thirds of the African countries that reported five times or less, 12 countries never reported, nine reported once, and another four reported only twice (see annex I).

2. Availability of data on drugs

17. Only two of the seven countries in Africa that responded to the questionnaire in 1991 kept a register, two had conducted surveys, two had carried out qualitative studies, two indicated that they had studied the attitudes held by the population towards drug abuse, and none had carried out studies on the cost and consequences of drug abuse (see table 3).

3. Interest in monitoring systems

18. Five of seven African countries indicated a desire to develop a drug-monitoring system, but most also pointed out that they needed assistance to do so. Three needed financial help; five needed professional support in training; four needed help with material; and one requested assistance with legal, technical and personnel problems and with expertise (see table 4).

4. Annual cannabis abuse

19. Fourteen African countries have been reporting an annual count of cannabis abusers since 1985. Of these, only four did so in 1991. The United Republic of Tanzania reported the highest count of abusers with 42,000 in 1991, followed by Namibia with 27,000. Far behind were Sudan with 2,503 abusers in 1991, Algeria with 1,708 in 1988, Côte d'Ivoire with 617 in 1991, and Rwanda with 600 in 1990 (see annex I).

20. Although most of the above figures are based on sources of an unspecified nature and may have little validity from a statistical point of view, they do reflect concern relating to the scope of cannabis and other drug abuse and may be useful as rough indicators of where efforts to reduce demand should be directed. This observation applies to all the data presented in the present report.

5. Daily cannabis abuse

21. Thirteen countries in Africa have reported a daily count of cannabis abusers since 1985. Of these, only three did so in 1991. Namibia reported the highest count of daily abusers with 13,800 in 1991, followed by the United Republic of Tanzania with 10,000 in 1991, and Mauritius with 4,500 in 1985. The daily count of abusers elsewhere in Africa is too insignificant to report.

6. Registered cannabis abusers

22. Ten countries in Africa have reported maintaining a register of cannabis abusers since reporting began in 1985. South Africa listed 623, Côte d'Ivoire 576, and Ghana 392. Two more countries reported having 100 or more registered cannabis abusers (see annex II).

7. Annual cocaine abuse

23. Only seven African countries have been reporting an annual count of cocaine abusers since 1985, and of these only five did so in 1991. Mauritius reported 436 abusers in 1991. In 1990, only Ghana mentioned cocaine as a problem. Abuse appears to be common among young adults who acquire the habit while abroad. According to the data submitted, cocaine problems are negligible in Africa. Since 1985, only four countries in Africa have identified cocaine as a problem drug, with only Nigeria and Côte d'Ivoire consistently

doing so (see annex I). However, changes in trafficking patterns may strongly influence future trends.

8. Daily cocaine abuse

24. Only two countries in Africa have reported a daily count of cocaine abusers since 1985, with both doing so in 1991. Mauritius reported 175 daily abusers in 1991. Daily counts are a good indicator of drug dependence, and in the present case serve to identify countries that may require special attention. The daily count of abusers elsewhere in Africa is too insignificant to report (see annex II).

9. Registered cocaine abusers

25. Three countries in Africa have reported maintaining a register of cocaine abusers since reporting began in 1985. South Africa listed 34 and Côte d'Ivoire 21 (see annex II).

10. Annual heroin abuse

26. Nine African countries have reported an annual count of heroin abusers since 1985. Of these only four did so in 1991. Mauritius reported 491 abusers in 1991, followed by Côte d'Ivoire with 113, United Republic of Tanzania with 100, Chad with 50, and Ghana with 25. Abuse appears to be common among young adults who acquire the habit while abroad. Heroin problems therefore require some attention, but are far from being a serious concern in Africa (see annex I).

27. One country voiced fears that it was beginning to be used as a transit country by a neighbour. Its concern focused primarily on the likelihood that greater availability of heroin would result in increased annual and daily abuse.

11. Daily heroin abuse

28. Two countries in Africa have reported an annual count of heroin abusers since 1985, with both doing so in 1991. Mauritius reported 175 daily abusers, followed by the United Republic of Tanzania with 50 (see annex II).

12. Registered heroin abuse

29. Three countries in Africa have reported maintaining a register of heroin abusers since reporting began in 1985. Cote d'Ivoire listed 114 and South Africa 17 (see annex II).

13. Other drug abuse

30. Benzodiazepines were reported by a total of 13 countries as presenting problems at some time during the past six years. Significant abuse was reported in North Africa and West Africa, but Madagascar, Mauritius and South Africa reported more frequently of problems with these drugs.

31. Several Governments reported on the consumption of khat and other indigenous plants that do not fall within the scope of the international drug control conventions. The pattern of drug abuse in South Africa appears different from the rest of the continent, since more drugs were reported as abused, and a persistent problem with inhalants and methaqualone was noted.

32. Drug abuse in Africa does not appear to be a severe problem according to the data supplied in the annual reports questionnaire. There is, however, a need to closely monitor patterns of cannabis consumption in the United Republic of Tanzania and Namibia, of cocaine and heroin in Mauritius, and of heroin in Côte d'Ivoire, and to encourage those countries to initiate programmes of demand reduction.

B. Americas

1. Patterns of reporting

33. About one third of the countries in the Americas have reported six or more times during the nine years of the drug survey. Chile, Ecuador, Guatemala and Uruguay reported each year, while Canada, Cuba, Mexico and Venezuela did so seven out of nine years. Among the two thirds of the American countries that reported five times or less, three countries never reported, five reported twice, and another eight reported only three times (see annex I).

2. Availability of data on drugs

34. Only two of five of the countries in the Americas that replied to the questionnaire in 1991 kept a register, three had conducted surveys, two had carried out qualitative studies, four had studied the attitudes held by the population towards drug abuse, and none had carried out studies on the cost and consequences of drug abuse (see table 3).

3. Interest in monitoring systems

35. Four of five American countries indicated a wish to develop a drug-monitoring system and two of them pointed out that they needed assistance to do so. Two needed financial help and professional support in training, and two required assistance with equipment (see table 4).

4. Annual cannabis abuse

36. Sixteen countries in the Americas have reported an annual count of cannabis abusers since 1985. Of these, only three did so in 1991. The United States of America reported the highest count of abusers with 21,099,000 in 1991, followed by Canada with 1,022,239, Mexico with 803,000, Ecuador with 205,887, Suriname with 40,000, Costa Rica with 32,605, Uruguay with 21,000 and Saint Lucia with 10,000 (see annex I).

5. Daily cannabis abuse

37. Twelve countries in the Americas have reported counts of daily cannabis abusers since 1985. Of these, only one did so in 1991. The United States of America reported the highest count of daily abusers with 7,268,205 in 1988, followed by Chile with 557,668 in 1991, Mexico with 129,000 in 1989, Suriname with 20,000 in 1987, and Ecuador with 18,717 in 1988.

6. Registered cannabis abuse

38. Twelve countries in the Americas have reported maintaining a register of cannabis abusers since reporting began in 1985. Mexico listed 435,000,

Uruguay 1,147, and Jamaica 340. Five countries reported having 100 or more registered cannabis abusers, including the three just named (see annex II).

7. Annual cocaine abuse

39. Only 16 American countries have reported an annual count of cocaine abusers since 1985. Of these, only three did so in 1991. This count was highest in the United States with 8,208,000, followed by Argentina with 200,000, Mexico with 88,000, Chile with 46,472, Bolivia with 40,044 and Ecuador with 28,075. The number of cocaine abusers, although more significant than in African countries, for example, remains modest in other parts of the Americas (see annex I).

40. In 1989, abuse of cocaine and crack in Canada was prevalent among 1.4 per cent of the population over the age of 15, that is, among 283,990 abusers. There are indications that cocaine consumption has since been declining.

8. Daily cocaine abuse

41. Fourteen countries in the Americas have reported a daily count of cocaine abusers since 1985, only one did so in 1991. The United States of America reported 1,242,027 daily abusers in 1987, followed by Argentina with 180,000 in 1987, Mexico with 58,000 in 1989, Chile with 18,589 in 1991, Bolivia with 5,000 in 1985 and Ecuador with 4,679 in 1988. The daily count of abusers elsewhere in the Americas is too insignificant to report (see annex II).

42. Over the past seven years, there has been an increase in the number of Caribbean countries reporting a cocaine problem. In 1985, British Virgin Islands, Cayman Islands, Dominica and Netherlands Antilles reported cocaine as a problem, but since then, Saint Kitts and Nevis, Trinidad and Tobago, Turks and Caicos Islands, Saint Lucia and Bahamas have also done so. In addition to an increase in cocaine consumption, many Caribbean countries reported the abuse of crack, as a direct result of cocaine traffickers using the islands. Spillage from this trade created a sudden explosion in the number of cocaine abusers from about 1985 onwards, but countermeasures on both the supply and demand side appear to have stabilized the situation, and the problem is actually diminishing in some of the countries concerned.

43. As the above-mentioned counts show, some Latin American countries report significant cocaine abuse. Some of them refer to coca-chewing and to the abuse of basuco, a paste which is an intermediate product in the production of cocaine. The abuse of basuco has even more serious health consequences than does cocaine, and the high count of users in Latin America is a matter of deep concern.

9. Registered cocaine abuse

44. Thirteen countries in the Americas have reported maintaining a register of cocaine abusers since reporting began in 1985. Mexico listed 63,000, Bolivia 11,044 and Canada 3,514 (see annex II).

10. Annual heroin abuse

45. Four American countries have reported an annual count of heroin abusers since 1985. Of these, none did so in 1991. The United States reported 500,000 abusers in 1988, followed by Mexico with 28,000, and far behind

Suriname with 55 and Netherlands Antilles with 28. Heroin problems, according to the data submitted, require attention mainly in the United States and Mexico. Some heroin abuse exists in other countries in the Americas (for example Canada) but no annual count has been estimated in the annual reports questionnaire (see annex I).

11. Daily heroin abuse

46. Three countries in the Americas have reported a daily count of heroin abusers since 1985, but none did so in 1991. The United States reported 492,000 daily abusers, followed by Suriname with 200 (see annex II).

12. Registered heroin abuse

47. Four countries in the Americas have reported maintaining a register of heroin abusers since reporting began in 1985. Canada listed 347, the three other countries 50 or less (see annex II).

13. Other drug abuse

48. In Mexico, cocaine consumption is again increasing but the sharpest increase is found in the consumption of benzodiazepines and inhalants. In the United States, a downward trend is reported for all drug consumption by young people, but among older age groups heroin abuse shows a slight increase. In 1989, Canada reported 81,140 abusers of either lysergic acid diethylamide (LSD), amphetamines or heroin. Drug abuse in Canada appears to have stabilized in recent years, and even started to decline.

49. The abuse of trihexaphenidil has been consistently reported from many countries in South America. Although it is licitly used to treat Parkinson's disease and is not a controlled substance, it may produce hallucinations when taken orally. There has been a parallel development between the use of phencyclidine in North America and trihexaphenidil in South America. Abuse of the latter substance is not reported anywhere else in the world.

50. Another characteristic of the Latin American States was the frequency with which inhalants were reported as a problem. Since 1985, 11 countries have reported their abuse. Most often the abuse of inhalants was associated with "street children", young people who have no home or means of support.

51. In 1990, for the first time, inhalants were reported as a problem in the Caribbean, but only by Dominica. Cannabis was identified as a problem by those Caribbean States which responded to the annual reports questionnaire, but no estimates were given of its prevalence. There have been no reports of heroin abuse in this subregion over the past six years, nor of any intravenous drug abuse.

52. In all of the Americas, only Argentina, the United States and Venezuela reported intravenous abuse of drugs.

53. To conclude, the prevalence of abuse of cocaine, cannabis and heroin in the Americas is the highest in the world. The United States, Mexico, Argentina, Ecuador and Canada should be targeted to monitor drug abuse and to develop programmes to curb demand.

C. Asia and the Pacific

1. Patterns of reporting

54. Four of 10 countries in the region of Asia and the Pacific reported six or more times during the nine years of the drug survey. The Philippines and Singapore reported each year, while seven other countries did so eight out of nine years. Among the 62 per cent of the countries in Asia and the Pacific which reported five times or less, five never reported, eight reported once, and another four reported only twice (see annex I).

2. Availability of data on drugs

55. Six of the seven countries in Asia and the Pacific that replied to the questionnaire in 1991 kept a register. Four had conducted surveys, one had carried out qualitative studies, one had studied the attitudes held by the population towards drug abuse and one had conducted studies on the cost and consequences of drug abuse (see table 3).

3. Interest in monitoring systems

56. Five of the eight countries in Asia and the Pacific that replied to the annual reports questionnaire indicated a wish to develop a drug-monitoring system. Many of them pointed out that they needed assistance to do so. Three needed financial help; three needed professional support in training; one requested assistance with equipment; and six requested assistance with legal, technical and personnel problems and expertise (see table 4).

4. Annual cannabis abuse

57. Seventeen countries in Asia and the Pacific have reported an annual count of cannabis abusers since 1985. Of these only four did so in 1991. New Zealand reported the highest count of abusers with 250,000 in 1989, followed by Bangladesh with 25,000 in 1985, Japan with 15,000 in 1989, French Polynesia with 15,000 in 1990, Papua New Guinea with 10,000 in 1985, Republic of Korea with 7,200 and Myanmar with 2,080 in 1991, and Malaysia with 2,070 in 1988. Significantly lower counts were reported elsewhere (see annex I).

58. Cannabis abuse in most of Asia and the Pacific has not been the cause of much concern since reporting began in 1985. Yet consumption levels indicated by the above counts show that attention should be given to demand reduction in all of the countries mentioned.

5. Daily cannabis abuse

59. Fourteen countries and territories in Asia and the Pacific have been reporting a daily count of cannabis abusers since 1985. Of these, only three did so in 1991. New Zealand reported the highest count of daily abusers with 25,000 in 1989, followed by the Republic of Korea with 3,600 in 1991, French Polynesia with 3,500 in 1990, Malaysia with 1,703 in 1988, Philippines with 1,617 in 1991, and Bangladesh with 1,000 in 1985. The daily count of abusers elsewhere in Asia and the Pacific is too insignificant to report.

6. Registered cannabis abuse

60. Fourteen countries in the Americas have reported maintaining a register of cannabis abusers since reporting began in 1985. Papua New Guinea listed

5,000, the Philippines 2,156 and Japan 1,620. Eight countries reported having 100 or more registered cannabis abusers, including the three just named (see annex II).

7. Annual cocaine abuse

61. Only eight countries in Asia and the Pacific have reported an annual count of cocaine abuse since 1985. Of these, only one did so in 1991. This count was highest in Japan with 15,000, followed by Malaysia with 2,552, the Philippines with 540, and French Polynesia with 275. The count of cocaine abusers elsewhere in the region is negligible, based on the reported data (see annex I). Cocaine abuse has been reported as a problem by Australia and Japan in previous reporting years, the latter reporting some increase in 1990.

8. Daily cocaine abuse

62. Five countries in Asia and the Pacific have been reporting a daily count of cocaine abusers since 1985, with only the Republic of Korea doing so in 1991. The highest reported counts of daily users was made in the Philippines, with 50 cases in 1991. The daily count of abusers in Asia and the Pacific is insignificant according to the data reported (see annex II).

9. Registered cocaine abuse

63. Nine countries in Asia and the Pacific have reported maintaining a register of cocaine abusers since reporting began in 1985. Japan listed 1,620, Malaysia 1,550 and Republic of Korea 838 (see annex II).

10. Annual heroin abuse

64. Twelve of the countries and territories in Asia and the Pacific have reported an annual count of heroine abusers since 1985. Of these, only three did so in 1991. Australia reported 100,000 abusers in 1987, followed by Sri Lanka with 37,500 and Myanmar with 16,660 in 1991, Malaysia with 14,578 and Hong Kong with 12,284 in 1990, Bangladesh with 10,000 in 1985 and Singapore with 4,171 in 1991. According to the data submitted, heroin problems require attention in all of the above-mentioned countries and territories. Some heroin abuse exists in other countries in Asia and the Pacific, but has not been reported in the annual reports questionnaire (see annex I).

11. Daily heroin abuse

65. Eight countries in Asia and the Pacific have reported a daily count of heroin abusers since 1985, with two doing so in 1991. Australia reported 40,000 daily abusers in 1987, followed by Malaysia with 12,723 in 1988, Myanmar with 8,330 in 1991, New Zealand with 4,000 in 1989, Bangladesh with 3,000 in 1985 and India with 1,458 in 1989 (see annex II).

66. Heroin and opium are major drugs of abuse in the region. Only Singapore reported an increase in heroin abuse, but Sri Lanka had reported an increase in each of the previous three years. All other countries reported that consumption was stable or decreasing. Nepal is the only country to report an increase in opium consumption.

12. Registered heroin abusers

67. Ten countries and territories in Asia and the Pacific have reported maintaining a register of heroin abusers since reporting began in 1985. Thailand listed 55,051, Hong Kong 37,509 and Myanmar 11,947 (see annex II).

13. Other drug abuse

68. Australia, Japan, New Zealand and Philippines reported an amphetamine problem, with the Philippines reporting a severe increase in amphetamine abuse over the past three years.

69. One disturbing trend in the region is the increasing use of syringes, particularly for administering heroin, but also for opium. This practice has led to the spread of infection with the human immunodeficiency virus (HIV) among previously unexposed populations. Australia, Bangladesh, Hong Kong, Japan, Myanmar, New Zealand and Thailand all reported intravenous abuse of drugs, previously the preferred means of administration of a number of drugs only in Australia and New Zealand.

D. Europe

1. Patterns of reporting

70. Seventy per cent of the European countries reported six or more times during the nine years of the drug survey. Among the remaining 30 per cent that reported five times or less, three countries never reported and two reported only once (see annex I).

2. Availability of data on drugs

71. Eleven of the 17 European countries that replied to the annual reports questionnaire in 1991 kept a register of drug abusers, eight had conducted surveys, five had carried out qualitative studies, six had studied the attitudes held by the population towards drug abuse, and none had conducted studies on the costs and consequences of drug abuse (see table 3).

3. Interest in monitoring systems

72. Five of the 17 European countries that replied to the questionnaire had once been part of the former Union of Soviet Socialist Republics (USSR), and each indicated a wish to develop a drug-monitoring system. They all pointed out that they needed assistance to do so, but not of a financial nature. Of the multiple requests, one was for professional support in training, two for assistance with material, and six for assistance with legal, technical and personnel problems and expertise (see table 4).

4. Annual cannabis abuse

73. Sixteen European countries have reported an annual count of cannabis abusers since 1983. Of these only nine did so in 1991. Spain reported the highest count of abusers with 1,560,776 in 1991, followed by Italy with 700,000 in 1990, Netherlands with 300,000 in 1985, Norway with 85,000 in 1991, Finland with 45,000 in 1991, Denmark with 25,000 in 1991, Iceland with 10,000 in 1987, and Turkey with 2,000 in 1989. Significantly lower counts were reported elsewhere (see annex I).

74. Cannabis consumption, although concentrated mainly in Spain, Italy and the Netherlands, is also widespread in Scandinavian countries, and appears to be gaining popularity in Eastern Europe. Hungary has reported cannabis as a problem for the past five years, and the Russian Federation for the past two years. Given the considerable demand for cannabis in Europe and the opening of new markets and trafficking routes, special attention might be required to curb demand in all of the above-mentioned countries, as well as in selected Eastern European countries with special concerns.

5. Daily cannabis abuse

75. Fourteen countries in Europe have reported a daily count of cannabis abusers since 1985. Of these, five did so in 1991. Spain reported the highest count of daily abusers with 312,156 in 1991, followed by Switzerland with 150,000 in 1990, Greece with 40,000 in 1989, Denmark with 30,000 in 1991, Germany with 20,100 in 1985, Netherlands with 12,500 in 1990 and Turkey, far behind, with 1,728 in 1989. The daily count of abusers elsewhere in Europe is too insignificant to report.

6. Registered cannabis abuse

76. Fourteen countries in Europe have reported maintaining a register of cannabis abusers since reporting began in 1985. The former USSR listed 50,000, France 16,014 and Greece 1,529. Ten countries reported having 100 or more registered cannabis abusers, including the three just named (see annex II).

7. Annual cocaine abuse

77. Only 13 countries in Europe have reported an annual count of cocaine abuse since 1983. Of these, eight did so in 1991. This count was highest in Spain with 624,311, followed by Netherlands with 75,000, Italy with 13,538, Denmark with 10,000, Norway with 2,500, and Finland with 2,200. The count of cocaine abusers elsewhere in Europe is negligible, on the basis of the reported data (see annex I).

78. Germany, Greece, Monaco, Netherlands, Norway, Spain and United Kingdom of Great Britain and Northern Ireland reported cocaine abuse as a problem in 1990. Cocaine abuse appears to be spreading through several countries in southern Europe. Overall, however, the reports signal a decrease from the levels of the previous year, when 10 countries reported a problem.

8. Daily cocaine abuse

79. Nine countries in Europe have reported a daily count of cocaine abusers since 1985, with only the Republic of Moldova doing so in 1991. The highest daily count in Europe is reported in Spain with 39,879 in 1989, followed by Switzerland with 16,000 in 1990 and Germany with 1,500 in 1985. The daily count of abusers elsewhere in Europe is insignificant according to the data reported (see annex II).

9. Registered cocaine abusers

80. Fourteen countries in Europe have reported maintaining a register of cocaine abusers since reporting began in 1985. Germany listed 2,308, the United Kingdom 1,085 and France 108 (see annex II).

10. Annual heroin abuse

81. Eleven of the European countries have reported an annual count of heroin abusers since 1985. Of these only four did so in 1991. Italy reported with 183,336 abusers in 1991, followed by Spain with 60,000 in 1986, the United Kingdom with 50,740 in 1990, Greece with 7,400 in 1991, Norway with 7,000 in 1991, Netherlands with 5,000 in 1985, Malta with 1,000 in 1987, Ireland with 798 in 1985 and Turkey with 483 in 1990. According to the data submitted, heroin problems require attention in all the countries mentioned. Some heroin abuse exists in other countries in Europe, but has not been reported in the annual reports questionnaires (see annex I).

11. Daily heroin abuse

82. Twelve countries in Europe have been reporting a daily count of heroin abusers since 1985, with only one doing so in 1991. Spain reported 57,288 daily abusers in 1988, followed by Netherlands with 20,000 in 1990, Switzerland with 18,000 in 1990, Germany with 12,300 in 1985, Greece with 9,500 in 1989 and Sweden with 1,250 in 1990. The daily count of abusers elsewhere in Europe is too insignificant to report (see annex II).

83. Italy, Spain and the Netherlands lead Western European countries in the annual prevalence of abuse of cannabis, cocaine and heroin. Multiple drug abuse in these countries is likely to be very common and require much attention, according to the data submitted in the annual reports questionnaires.

84. In Eastern Europe, the pattern of abuse tends to be different. Some heroin abuse exists and is characterized by the consumption of various products derived from locally grown poppy straw.

12. Registered heroin abuse

85. Fourteen countries in Europe have reported maintaining a register of heroin abusers since reporting began in 1985. Italy listed 50,000, the United Kingdom 14,497 and Germany 1,620. Eight countries reported having 100 or more registered heroin abusers, including the three just named (see annex II).

13. Other drug abuse

86. Amphetamine abuse has been reported as a problem mainly by the northern and Western European countries in past years. It is now emerging as a problem and causing concern in Eastern Europe as well.

E. Near and Middle East

1. Patterns of reporting

87. Thirty-five per cent of the countries in the region of the Near and Middle East reported six or more times during the nine years of the drug survey. Egypt and Pakistan reported eight out of nine years. Among the remaining 65 per cent that reported five times or less, only Afghanistan never reported, three reported once, and another reported twice (see annex I).

2. Availability of data on drugs

88. None of the three countries in the Near and Middle East that responded to the annual reports questionnaire in 1991 kept a register of drug abusers.

Only one had conducted surveys, none had carried out qualitative studies, one had studied the attitudes held by the population towards drug abuse, and none had conducted studies on the cost and consequences of drug abuse (see table 3).

3. Interest in monitoring systems

89. Two of the three countries in the Near and Middle East that replied to the annual reports questionnaire wished to develop a drug-monitoring system. Both of them pointed out that they needed financial assistance to do so, and both requested a combination of legal, technical and personnel assistance and expertise (see table 4).

4. Annual cannabis abuse

90. Six countries in the Near and Middle East have reported an annual count of cannabis abusers since 1985. Of these, only two did so in 1991. Pakistan reported the highest count of abusers with 854,085 in 1989, followed by Israel with 80,000 in 1991. Far behind were Syrian Arab Republic with 1,910 in 1991, and Jordan with 1,000 in 1989. Consumption of cannabis appears to be negligible elsewhere in this region, on the basis of the data received (see annex I).

91. Cannabis consumption, although highly concentrated in Pakistan and Israel according to the available data, is known to be widespread in other countries of the region. Some are either producers of importance or key transit points in the global cannabis market. Special attention might be required to reduce demand in the countries listed above. Special efforts may also be needed to curb supply from the region.

5. Daily cannabis abuse

92. Five countries in the Near and Middle East have been reporting a daily count of cannabis abusers since 1985. Of these, only Syrian Arab Republic did so in 1991. Pakistan reported the highest count of daily abusers with 500,000 in 1987, followed by the Islamic Republic of Iran with 50,000 in 1989, Israel with 38,000 in 1990 and Syrian Arab Republic with 1,910 in 1991. The daily count of abusers elsewhere in the Near and Middle East is too insignificant to report.

6. Registered cannabis abuse

93. Six countries in the Near and Middle East have reported maintaining a register of cannabis abusers since reporting began in 1985. Pakistan listed 3,248 and Syrian Arab Republic 1,910 (see annex II).

7. Annual cocaine abuse

94. Six countries in the Near and Middle East have reported an annual count of cocaine abuse since 1983. Of these, only Israel did so in 1991. The count was highest in Israel with 20,000, followed by Egypt with 145. The count of cocaine abusers elsewhere in the Near and Middle East is negligible, on the basis of the reported data (see annex I).

8. Daily cocaine abuse

95. Three countries in the Near and Middle East have been reporting a daily count of cocaine abusers since 1985, but none did so in 1991. Israel reported

1,000 daily abusers in 1986. The daily count of abusers elsewhere in the region is too insignificant to report (see annex II).

9. Registered cocaine abuse

96. Five countries in the Near and Middle East have reported maintaining a register of cocaine abusers since reporting began in 1985. Egypt listed 145 (see annex II).

10. Annual heroin abuse

97. Ten of the countries in the Near and Middle East have reported an annual count of heroin abusers since 1985. Of these, none did so in 1991. Pakistan reported with 1,079,635 abusers in 1989, followed by the Islamic Republic of Iran with 150,000 in 1990, Israel with 19,000 in 1989, Bahrain with 2,978 in 1986, Syrian Arab Republic with 204 in 1989, Egypt with 130 in 1989 and Jordan with 100 in 1989. According to the data submitted, heroin problems require attention in most of the countries listed above. Some heroin abuse is prevalent in other countries in the Near and Middle East, but has not been reported in the annual reports questionnaires (see annex I).

11. Daily heroin abuse

98. Six countries in the Near and Middle East have reported a daily count of heroin abusers since 1985, but none did so in 1991. Pakistan reported 425,000 daily abusers in 1987, followed by the Islamic Republic of Iran with 200,000 in 1989, and Israel with 1,710 in 1989. The daily count of abusers elsewhere in the region is too insignificant to report (see annex II).

99. Heroin is the most widely abused drug in the region, followed by cannabis and cocaine. The countries that require most attention are Pakistan, Islamic Republic of Iran, Israel and Syrian Arab Republic.

100. Pakistan, Islamic Republic of Iran and Israel reported an increase in heroin abuse over the past six years, with Pakistan reporting the highest increase. Only Qatar has reported a decrease in heroin abuse. The Islamic Republic of Iran and Pakistan have by far the largest number of heroin dependents, with Pakistan reporting significantly higher figures than any other country in the region.

101. Within the Near and Middle East, Egypt, Jordan, Oman and the Syrian Arab Republic have reported intravenous drug abuse.

12. Registered heroin abuse

102. Seven countries in the Near and Middle East have reported maintaining a register of heroin abusers since reporting began in 1985. Pakistan listed 13,290 and Egypt 130 (see annex II).

13. Implementation of targets of the Comprehensive Multidisciplinary Outline of Future Activities in Drug Abuse Control 2/

103. Unfortunately, the number of replies to the questionnaire on demand reduction was insufficient. A report on the extent to which Member States, intergovernmental organizations and non-governmental organizations in consultative status with the Economic and Social Council have achieved targets

1 to 7 of the Comprehensive Multidisciplinary Outline of Future Activities in Drug Abuse Control was requested in the Global Programme of Action adopted by the General Assembly at its seventeenth special session. 3/ The monitoring of targets 29 to 35 was requested by the Council in its resolution 1991/46 of 21 June 1991. If a sufficient number of replies to the questionnaire are received, an analysis of the results will be submitted to the Commission on Narcotic Drugs at its thirty-seventh session in 1994.

Notes

1/ United Nations, Treaty Series, vol. 528, No. 7515.

2/ United Nations publication, Sales No. E.87.I.18, chap. I, sect. A.

3/ Resolution S-17/2, annex, of 23 February 1990.

Annex I

ANALYSIS OF REPLIES TO PART B OF THE ANNUAL REPORTS QUESTIONNAIRE: DATA ON ANNUAL DRUG ABUSE

Table 6. Total reported number of annual abusers of cannabis, cocaine and heroin, by country, 1985-1991

Country or territory	Number of reported abusers						
	1985	1986	1987	1988	1989	1990	1991
A. Cannabis							
AFRICA							
Algeria				1 708(U)			
Benin			26				
Burundi				224(P)			
Chad					50(E)		
Côte d'Ivoire							617
Ethiopia					17		
Ghana		322(P)					
Namibia							27 600
Nigeria					200(H)		
Rwanda						600	
Sudan				70(P)			
United Republic of Tanzania							42 000
Zambia						72(H)	
AMERICAS							
Bolivia	39(H)						
Brazil		167(S)					
British Virgin Islands	30(E)						
Cayman Islands					750(E)		
Chile							1 022 239(S)
Costa Rica							3 260 500
Dominica		35					
Ecuador				205 887(H)			
Guyana	190						
Mexico					800 000(S)		
Saint Lucia					10 000(E)		
Suriname			40 000(C)				
Turks and Caicos Island			125(E)				
United States of America					2 109 900(S)		
Uruguay							2 100 000(H)

continued

Table 6 (continued)

Country or territory	Number of reported abusers						
	1985	1986	1987	1988	1989	1990	1991
ASIA AND THE PACIFIC							
Bangladesh	25 000(E)						
Fiji					300(E)		
French Polynesia						15 000(E)	
Hong Kong						439(C)	
Indonesia				231			
Japan					15 000(P)		
Malaysia				2 070(C)			
Maldives			1(P)				
Myanmar							2 080(H)
New Caledonia		2 500					
New Zealand					250 000(E)		
Papua New Guinea	10 000(P)						
Philippines							185(H)
Republic of Korea							7 200(H)
Singapore							138(P)
Vanuatu		2(E)					
EUROPE							
Czechoslovakia							100
Denmark							25 000
Finland							45 000
Greece							1 017
Iceland			10 000				
Ireland	138						
Italy						700 000	
Latvia							5
Malta			1 600				
Monaco						46	
Netherlands	300 000						
Norway							85 000
Republic of Moldova							61
San Marino							10
Spain							1 560 779
Turkey					2 000		

continued

Table 6 (continued)

Country or territory	Number of reported abusers						
	1985	1986	1987	1988	1989	1990	1991
NEAR AND MIDDLE EAST							
Israel							80 000
Jordan					1 000		
Kuwait		10					
Oman				2			
Pakistan					854 085		
Syrian Arab Republic							1 910
B. Cocaine							
AFRICA							
Benin			1				
Côte d'Ivoire							30
Ghana		5(P)					
Mauritius							436
Nigeria					1(H)		
Sudan							5
United Republic of Tanzania							40(H)
AMERICAS							
Argentina				200 000			
Bolivia	40 044(H)						
Brazil		41(C)					
Cayman Islands					1 500(E)		
Chile							46 472(S)
Costa Rica							3 786
Ecuador				28 075(H)			
Guyana	3						
Mexico					88 000(S)		
Saint Lucia					2 000(H)		
Suriname			1 000(H)				
Turks and Caicos Islands			175(E)				
United States of America					8 208 000(S)		
Uruguay							5 000(H)

continued

Table 6 (continued)

Country or territory	Number of reported abusers						
	1985	1986	1987	1988	1989	1990	1991
ASIA AND THE PACIFIC							
French Polynesia						275(E)	
Hong Kong					13(C)		
Japan					15 000(P)		
Malaysia					2 552(C)		
Papua New Guinea	3(S)						
Philippines						540(C)	
Republic of Korea							35(E)
NEAR AND MIDDLE EAST							
Egypt						145(H)	
Israel							20 000(S)
Jordan						20	
Kuwait	5(H)						
Oman		2(H)					
Syrian Arab Republic						18	
EUROPE							
Denmark							10 000(S)
Finland							2 200
Greece							50(E)
Iceland			500(E)				
Ireland	15(H)						
Italy							13 538
Monaco						7	
Netherlands	75 000(C)						
Norway							2 500
Republic of Moldova							3
San Marino							1(E)
Spain							624 311(S)
Turkey					20		

continued

Table 6 (continued)

Country or territory	Number of reported abusers						
	1985	1986	1987	1988	1989	1990	1991
C. Heroin							
AFRICA							
Benin			1				
Chad					50		
Côte d'Ivoire							113
Ghana		25					
Mauritius							491
Nigeria					1		
Sudan							11
United Republic of Tanzania							100
Zambia						11	
AMERICAS							
Mexico						28 000	
Netherlands Antilles		28					
Suriname		55					
United States of America				500 000			
ASIA AND THE PACIFIC							
Australia			100 000				
Bangladesh	10 000						
Hong Kong						12 284	
Indonesia				12			
Malaysia					14 578		
Myanmar							16 660
New Zealand					10 000		
Papua New Guinea	3						
Philippines							7
Republic of Korea					70		
Singapore							4 171
Sri Lanka					37 500		

Table 6 (continued)

Country or territory	Number of reported abusers						
	1985	1986	1987	1988	1989	1990	1991
EUROPE							
Greece							7 400
Ireland	798						
Italy							183 336
Malta			1000				
Monaco						2	
Netherlands	5 000						
Norway							7 000
San Marino							4
Spain		60 000					
Turkey						483	
United Kingdom						50 740	
NEAR AND MIDDLE EAST							
Bahrain		2 978					
Egypt					130		
Iran (Islamic Republic of)						150 000	
Israel					19 000		
Jordan					100		
Kuwait		50					
Oman				8			
Pakistan					1 079 635		
Qatar						64	
Syrian Arab Republic					204		

Note: Data sources indicated in parentheses.

H = Health records
P = Police records
S = Surveys
C = Combined estimate based on H, P, S
E = Estimate

Annex II

ANALYSIS OF REPLIES TO PART B OF THE ANNUAL REPORTS QUESTIONNAIRE: DATA ON ANNUAL AND DAILY DRUG ABUSE AND REGISTERED ABUSERS

Table 7. Total reported number of annual, daily and registered abusers of cannabis, cocaine and heroin, by country, 1985-1991

Country or territory	Annual abusers			Daily abusers			Registered abusers		
	Total number	Year	Data source	Total number	Year	Data source	Total number	Year	Data source
	A. Cannabis								
AFRICA									
Algeria	1,708	1988		95	1988			1988	
Benin	26	1987		80	1985	C	30	1990	C
Burundi	224	1988	P	224	1988	P	224	1988	P
Chad	50	1989	E		1989			1989	
Côte Ivoire	617	1991			1989		576	1991	P
Ethiopia	17	1989			1990		17	1989	
Ghana	322	1986	P		1990		392	1985	
Madagascar		1989		200	1989	H		1989	
Mali		1985			1985		9	1985	
Mauritius		1991		4,500	1985			1991	
Morocco		1989		130	1985			1989	
Mozambique		1988		90	1988		125	1988	
Namibia	27,600	1991		13,800	1991			1991	
Nigeria	200	1989	H	5	1989	H	20	1986	H
Rwanda	600	1990		200	1990		200	1990	
South Africa		1990			1990		623	1990	
Sudan	2,503	1991		8	1991			1991	
Togo	70	1988	P	35	1988	P		1990	
United Republic of Tanzania	42,000	1991		10,000	1991			1991	
Zambia	72	1990	H		1990			1990	
AMERICAS									
Bolivia	39	1985	H		1987		39	1985	H
Brazil	167	1986	S	34	1986	S		1986	
British Virgin Islands	30	1985	E		1989			1989	
Cayman Islands	750	1989	E	375	1989	E	64	1989	E
Chile	1,022,239	1991	S	557,668	1991	S	141	1985	
Costa Rica	32,605	1991			1991			1991	
Dominica	35	1986		100	1985	C	35	1986	
Ecuador	205,887	1988	H	18,717	1988	H		1991	
Grenada		1990			1990		87	1990	
Guyana	190	1985			1985			1985	
Jamaica		1985			1985		340	1985	
Mexico	803,000	1989	S	129,000	1989	S	435,000	1990	
Netherlands Antilles		1990			1990		1	1987	
Saint Lucia	10,000	1989	E	1,000	1989	E	15	1988	H
Suriname	40,000	1987	C	20,000	1987		100	1987	
Turks and Caicos Islands	125	1987	E	20	1987	E		1987	
United States of America	21,099,000	1989	S	7,268,205	1988	S		1989	
Uruguay	21,000	1991	H	300	1985	E	1,147	1991	P
ASIA AND THE PACIFIC									
Bangladesh	25,000	1985	E	1,000	1985	E		1989	
Fiji	300	1989	E	100	1989	E	20	1989	E
French Polynesia	15,000	1990	E	3,500	1990	E		1990	
Hong Kong	439	1990	C		1990		1,340	1990	C
India		1989		41	1989	C	66	1989	C
Indonesia	231	1988			1990		71	1991	C
Japan	15,000	1989	P		1990		1,620	1990	
Malaysia	2,070	1988	C	1,703	1988	C	1,214	1990	C
Maldives	1	1987	P	18	1985	P		1987	
Myanmar	2,080	1991	H	520	1991	H	343	1989	
New Caledonia	2,500	1986		150	1986		2	1986	
New Zealand	250,000	1989	E	25,000	1989	E		1989	E
Papua New Guinea	10,000	1985	P	200	1985	P	5,000	1985	P
Philippines	185	1991	H	1,617	1991	H	2,156	1991	H
Republic of Korea	7,200	1991	H	3,600	1991	H	1,082	1991	P
Singapore	138	1991	P	6	1987		74	1987	
Thailand		1990			1990		771	1988	

continued

Table 7 (continued)

Country or territory	Annual abusers			Daily abusers			Registered abusers		
	Total number	Year	Data source	Total number	Year	Data source	Total number	Year	Data source
Vanuatu	2	1986	E		1986			1986	
EUROPE									
Cyprus		1990		50	1990	E		1990	
Czechoslovakia	100	1991			1990		26	1991	H
Denmark	25,000	1991	S	30,000	1991	S		1991	H
Finland	45,000	1991			1951			1991	
France		1990			1990		16,014	1987	
Germany		1991		20,100	1985	H		1991	
Greece	1,017	1991		40,000	1989	E	1,529	1991	H
Iceland	10,000	1987	E	500	1989	E	600	1988	
Ireland	138	1985	H		1985			1985	
Italy	700,000	1990			1990			1990	
Latvia	5	1991	P	2	1991	P	2	1991	P
Luxembourg		1989			1989		311	1985	
Malta	1,600	1987	C	900	1987	C	100	1987	C
Monaco	46	1990			1991		132	1989	
Netherlands	300,000	1985	C	12,500	1990	C		1990	
Norway	85,000	1991			1991			1991	
Portugal		1990		316	1985	H	141	1989	
Republic of Moldova	61	1991		61	1991		61	1991	
San Marino	10	1991		1	1991		10	1991	P
Spain	1,560,779	1991	E	312,156	1991	E		1990	
Switzerland		1990		150,000	1990			1990	
Turkey	2,000	1989		1,728	1989		722	1990	H
Union of Soviet Socialist Republics		1990			1990		10,473	1990	
Yugoslavia		1989			1989		154	1989	H
NEAR AND MIDDLE EAST									
Bahrain		1990			1990		30	1989	H
Iran (Islamic Republic of)		1990		50,000	1989			1990	
Israel	80,000	1991	S	38,000	1990	S		1991	
Jordan	1,000	1989			1990		53	1989	
Kuwait	10	1986		1	1985	H	1	1986	
Oman	2	1988	H		1988		8	1988	
Pakistan	854,085	1989		500,000	1987	E	3,248	1985	H
Syrian Arab Republic	1,910	1991	P	1,910	1991	P	1,910	1991	P
	B. Cocaine								
AFRICA									
Benin	1	1987			1990		1	1990	
Côte Ivoire	30	1991			1991		21	1991	P
Ghana	5	1986	P		1990			1990	
Mauritius	436	1991		175	1991			1991	
Nigeria	1	1989	H		1989	H		1989	H
South Africa		1990			1990		34	1990	H
Sudan	5	1991			1991			1991	
United Republic of Tanzania	40	1991	H	20	1991	H		1991	
AMERICAS									
Argentina	200,000	1988		180,000	1987	C		1988	
Bolivia	40,044	1985	H	5,000	1985	H	11,044	1985	H
Brazil	41	1986	C	8	1986	C		1986	
British Virgin Islands		1989			1989		8	1989	H
Canada		1990			1990		3,514	1989	
Cayman Islands	1,500	1989	E	750	1989	E	103	1989	E
Chile	46,472	1991	S	18,589	1991	S		1991	
Costa Rica	3,786	1991			1991			1991	
Ecuador	28,075	1988	H	4,679	1988	H		1990	
Grenada		1990			1990		12	1990	
Guyana	3	1985			1986			1986	
Jamaica		1985			1985		59	1985	

continued

Table 7 (continued)

Country or territory	Annual abusers			Daily abusers			Registered abusers		
	Total number	Year	Data source	Total number	Year	Data source	Total number	Year	Data source
Mexico	88,000	1989	S	58,000	1989	S	63,000	1990	
Netherlands Antilles		1990			1990		57	1987	H
Saint Lucia	2,000	1989	H	100	1989	H	19	1988	H
Suriname	1,000	1987	H	0	1989		0	1989	
Turks and Caicos Islands	175	1987	E	30	1987	E		1987	
United States of America	8,208,000	1989	S	1,242,027	1988	S		1989	
Uruguay	5,000	1991	H	10	1985	E	23	1987	
ASIA AND THE PACIFIC									
French Polynesia	275	1990	E	35	1990	E		1990	
Hong Kong	13	1989	C		1990		38	1989	C
Indonesia		1991			1991		2	1990	H
Japan	15,000	1989	P		1991		1,620	1990	
Malaysia	2,552	1989	C		1990		1,550	1989	
Papua New Guinea	3	1985	P	1	1985	P	2	1985	P
Philippines	540	1990	C	50	1990	C	54	1990	H
Republic of Korea	35	1991	E	14	1991	E	838	1991	H
EUROPE									
Bulgaria		1990			1990		101	1985	
Cyprus		1990		4	1990	E		1990	
Denmark	10,000	1991	S		1991			1991	H
Finland	2,200	1991			1991			1991	
France		1990			1990		508	1987	
Germany		1991		1,500	1985		2,308	1990	H
Greece	50	1991	E	6	1988	C	65	1991	H
Iceland	500	1987	E	130	1989	E	150	1988	
Ireland	15	1985	H		1985			1985	
Italy	13,538	1991			1990		250	1989	
Netherlands	75,000	1985	C		1990			1990	
Norway	2,500	1991			1991			1991	
Portugal		1990		37	1985	H	20	1989	
Republic of Moldova	3	1991		3	1991		3	1991	
San Marino	1	1991	E		1991		1	1991	P
Spain	624,311	1991	S	39,879	1988			1991	
Switzerland		1990		16,000	1990	E		1990	
Turkey	20	1989		15	1989		1	1990	
Union of Soviet Socialist Republics		1990			1990		3	1988	H
U. K. of Great Britain and Northern Ireland		1990			1990		1,085	1990	
Yugoslavia		1989			1989		10	1989	H
NEAR AND MIDDLE EAST									
Bahrain		1990			1990		1	1990	
Egypt	145	1989	H	145	1989	H	145	1989	H
Israel	20,000	1991	S	1,000	1986	H		1991	
Jordan	20	1989			1990		1	1989	
Kuwait	5	1985	H	1	1985	H	2	1985	H
Oman	2	1986	H		1988		1	1988	H
Syrian Arab Republic	18	1989			1991			1991	
	C. Heroin								
AFRICA									
Benin	1	1987			1990		2	1988	H
Chad	50	1989	E		1989			1989	
Côte Ivoire	113	1991			1991		114	1991	P
Ghana	25	1986	P		1990			1990	
Mauritius	491	1991	P	175	1991			1991	
Nigeria	1	1989	H		1989			1989	
South Africa		1990			1990		17	1990	
Sudan	11	1991			1991			1991	
United Republic of Tanzania	100	1991		50	1991			1991	H
Zambia	11	1990	H		1990			1990	

continued

Table 7 (continued)

Country or territory	Annual abusers			Daily abusers			Registered abusers		
	Total number	Year	Data source	Total number	Year	Data source	Total number	Year	Data source
AMERICAS									
Canada		1990			1990		347	1989	
Mexico	28,000	1980	S		1990		50	1987	
Netherlands Antilles	28	1986		14	1985	H	6	1986	
Suriname	55	1986		200	1987	H	50	1987	
United States of America	500,000	1988	S	492,000	1987	S		1989	
ASIA AND THE PACIFIC									
Australia	100,000	1987	C	40,000	1987	C		1990	
Bangladesh	10,000	1985	E	3,000	1985	E		1989	
Hong Kong	12,284	1990	C		1990		37,509	1990	
India		1989	C	1,438	1989		1,465	1989	
Indonesia	12	1988			1990		1	1991	C
Malaysia	14,578	1989	C	12,723	1988	C	4,987	1990	
Myanmar	16,660	1991	H	8,330	1991	H	11,947	1990	H
New Zealand	10,000	1989	P	4,000	1989	P		1989	
Papua New Guinea	3	1985	P		1985		2	1985	P
Philippines	7	1991	H	16	1991	H	16	1991	H
Republic of Korea	70	1989	E		1991		7	1989	
Singapore	4,171	1991	P	860	1990	E	4,589	1990	
Sri Lanka	37,500	1989	P		1989			1989	
Thailand		1990			1990		55,051	1988	
EUROPE									
Cyprus		1990		6	1990	E		1990	
Germany		1991		12,300	1985		7,252	1990	H
Greece	7,400	1991	E	9,500	1989	C	2,035	1991	H
Iceland		1989		8	1989	E	5	1988	
Ireland	798	1985	H		1985			1985	
Italy	183,336	1991	H		1991		50,000	1990	
Luxembourg		1985			1985		208	1985	
Malta	1,000	1987	C	700	1987	C	190	1987	C
Monaco	2	1990			1991		62	1989	
Netherlands	5,000	1985	S	20,000	1990	S		1990	
Norway	7,000	1991			1991			1991	
Portugal		1990		614	1985	H	17	1989	
San Marino	4	1991	S	7	1991	S	22	1991	H
Spain	60,000	1986	H	57,288	1988			1990	
Sweden		1991		1,250	1990	S		1991	
Switzerland		1990		18,000	1990	E		1990	
Turkey	483	1990	H	302	1990	H	403	1990	H
Union of Soviet Socialist Republics		1990			1990		4	1988	H
U. K. of Great Britain and Northern Ireland	50,740	1990			1990		14,497	1990	
Yugoslavia		1989			1989		189	1989	H
NEAR AND MIDDLE EAST									
Bahrain	2,978	1986	H		1990		85	1990	
Egypt	130	1989	H	130	1989	H	130	1989	H
Iran (Islamic Republic of)	150,000	1990	P	200,000	1989	P		1990	P
Israel	19,000	1989		1,710	1989			1990	
Jordan	100	1989			1990		30	1989	
Kuwait	50	1986		4	1986		49	1986	
Oman	8	1988	H		1988		31	1988	
Pakistan	1,079,635	1989	S	425,000	1987	E	13,290	1985	
Qatar	64	1990	H	40	1990	H	64	1990	H
	204	1989			1991			1991	

C = Combined estimate based on H, P and S
E = Estimates
H = Health records
P = Police records
S = Surveys